

AO 440 (Rev. 06/12) Summons in a Civil Action (Page 2)

Civil Action No. 1:24-cv-1222

PROOF OF SERVICE*(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

This summons for (name of individual and title, if any) U.S. Attorney's Office, Civil Process Clerk
 was received by me on (date) 07/16/2024.

☐ I personally served the summons on the individual at (place) _____
 on (date) _____; or

☐ I left the summons at the individual's residence or usual place of abode with (name) _____
 _____, a person of suitable age and discretion who resides there,
 on (date) _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on (name of individual) _____, who is
 designated by law to accept service of process on behalf of (name of organization) _____
 on (date) _____; or

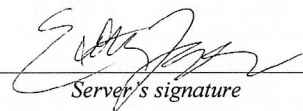
☐ I returned the summons unexecuted because _____; or

☒ Other (specify): I served the complaint and summons on U.S. Attorney's Office, Civil Process Clerk by certified mail return receipt requested, to the address listed on the summons on July 17, 2024.

My fees are \$ 0.00 for travel and \$ 0.00 for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

Date: 07/17/2024


 Server's signature

Esther Tonnesen, Legal Assistant

Printed name and title

Murray Osorio PLLC
 4103 Chain Bridge Rd., Ste. 300
 Fairfax, VA 22030

Server's address

9589 0710 5270 1019 7903 85

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

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Alexandria, VA 22314

Certified Mail Fee	\$4.85
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00
Postage	\$2.31
Total Postage and Fees	\$11.26
Sent To	
Street and Apt. No.	
City, State, ZIP+4®	

U.S. Attorney's Office
 Civil Process Clerk
 2100 Jamieson Ave.
 Alexandria, VA 22314

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

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Civil Action No. 1:24-cv-1222

PROOF OF SERVICE*(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

This summons for (name of individual and title, if any) Merrick Garland, U.S. Department of Justice
 was received by me on (date) 07/16/2024.

☐ I personally served the summons on the individual at (place) _____
 on (date) _____; or

☐ I left the summons at the individual's residence or usual place of abode with (name) _____
 _____, a person of suitable age and discretion who resides there,
 on (date) _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on (name of individual) _____, who is
 designated by law to accept service of process on behalf of (name of organization) _____
 on (date) _____; or

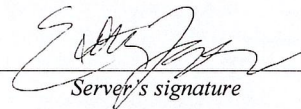
☐ I returned the summons unexecuted because _____; or

☒ Other (specify): I served the complaint and summons on Merrick Garland, U.S. Department of Justice by certified mail return receipt requested, to the address listed on the summons on July 17, 2024.

My fees are \$ 0.00 for travel and \$ 0.00 for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

Date: 07/17/2024


 Server's signature

Esther Tonnesen, Legal Assistant
 Printed name and title

Murray Osorio PLLC
 4103 Chain Bridge Rd., Ste. 300
 Fairfax, VA 22030
 Server's address

9589 0710 5270 2082 7619 68

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Washington, DC 20530

Certified Mail Fee \$4.85

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$2.31

Total Postage \$11.26

Sent To

Street and Apt.

City, State, ZIP

Merrick Garland
 U.S. Department of Justice
 950 Pennsylvania Ave., NW
 Washington, DC 20530-0001

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

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Civil Action No. 1:24-cv-1222

PROOF OF SERVICE*(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

This summons for (name of individual and title, if any) U.S. Department of State, Executive Office of the Office of
 was received by me on (date) 07/16/2024 the Legal Adviser and Bureau of Legislative Affairs

☐ I personally served the summons on the individual at (place) _____
 on (date) _____ ; or

☐ I left the summons at the individual's residence or usual place of abode with (name) _____
 _____, a person of suitable age and discretion who resides there,
 on (date) _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on (name of individual) _____, who is
 designated by law to accept service of process on behalf of (name of organization) _____
 on (date) _____ ; or

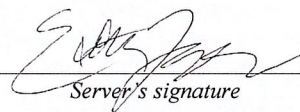
☐ I returned the summons unexecuted because _____ ; or

☒ Other (specify): I served the complaint and summons on the U.S. Department of State, Executive Office
 of the Office of the Legal Adviser and Bureau of Legislative Affairs by certified mail
 return receipt requested, to the address listed on the summons on July 17, 2024.

My fees are \$ 0.00 for travel and \$ 0.00 for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

Date: 07/17/2024


 Server's signature

Esther Tonnesen, Legal Assistant

Printed name and title

Murray Osorio PLLC
 4103 Chain Bridge Rd., Ste. 300
 Fairfax, VA 22030

Server's address

9589 0710 5270 2082 8298 11

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Washington, DC 20522	
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Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00
Postage	\$2.31
Total Postage and Fees	\$11.26
Sent To	U.S. Department of State
Street and Apt. N°	The Executive Office
City, State, ZIP+4	Office of the Legal Adviser Ste 5.600, 600 19th St. NW. Washington, DC 20522

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions